

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Paramount Classics

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 5555 Melrose Avenue, Chevalier Building
Hollywood, CA 90038

Name of Agent Designated to Receive
Notification of Claimed Infringement: Brooke Ford

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Paramount Classics 5555 Melrose Avenue Chevalier Building
Hollywood, CA 90038

Telephone Number of Designated Agent: 323.956.2441

Facsimile Number of Designated Agent: 323.862.2151

Email Address of Designated Agent: brooke_ford@paramount.com

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 3/1/02

Typed or Printed Name and Title: Brooke Ford, Executive Director of
Marketing

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

MAR 08 2002

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